BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

MSI-752 US

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			247					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FÉE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			42 minus 20=		. 22		,	X\$ 9=	į	OR	X\$18=	396
INDEPENDENT CLAIMS				nus 3 =	<u>"</u>			X40=		OR	X80=	80
MUI	TIPLE DEPENI	DENT CLÁIM P	RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in o					r "0" in c	olumn 2	,	TOTAL		OR	TOTAL	1186
CLAIMS AS AMENDED - PART II												THAN
(Column 1)			(Colum			(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***]=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	TCLAIM]	+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT, FEE	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	•••	T OL AIM]=	4	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	<i>;</i>
	Independent	•	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							467			.070	
	te ato a construction of the	4 ia lana than	the entry in sel	umn 2 um	tte "0" in ~	dumo 3		+135=		OR	+270=	
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
l "	II Ine mignest Nu	umber Previously	aid For (Total	v Indoner	whent\ is th	a highest numb	ar fo	und in the ap	od etahoond	x in co	dumn 1.	